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PART B—ISSUE FEE TRANSMITTAL

18000.0029.0

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS

Edward J. Lynch, Esq.
CROSBY, HEAFETY, ROACH & MAY
1999 Harrison Street
P.O. Box 2084
Oakland, CA 94604-2084

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

Check if additional changes are on reverse side

91 JUL 7 PUBL RECEIVED
P.M. DIVISION
1995

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/208,972	03/09/94	004	THALER, M	3309 06/13/95

First Name
Applicant

YOCK,

PAUL G.

TITLE OF
INVENTION

ANGIOPLASTY APPARATUS FACILITATING RAPID EXCHANGES AND METHOD

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
					18000.0029.0 606-191.000 M51 UTILITY NO. \$1210.00	09/13/95

3. Correspondence address change (Complete only if there is a change) **4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.**

Crosby, Heafey,
Roach & May

1 _____

2 _____

3 _____

DO NOT USE THIS SPACE

PK16001 07/17/95 08208972 03-3821 160 142 1,210.00CH
PK16002 07/17/95 08208972 03-3821 160 561 30.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

(2) ADDRESS: (CITY & STATE OR COUNTRY)

6a. The following fees are enclosed:

A. This application is NOT assigned.

Assignment previously submitted to the Patent and Trademark Office.

Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

Issue Fee Advance Order - # of Copies _____

6b. The following fees should be charged to:

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Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) Edward J. Lynch

Reg. No. 744422

(Date)

7/16/95

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

1. TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

1. CORRESPONDENCE ADDRESS

Edward J. Lynch, Esq.
 CROSBY, HEAFY, ROACH & MAY
 1999 Harrison Street
 P.O. Box 2084
 Oakland, CA 94604-2084

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/208 972	08/09/94	004	THALER, M	3309 08/13/95

First Named
Applicant

PALU, G.

ITLE OF
INVENTION

ANGIOPLASTY APPARATUS FACILITATING RAPID EXCHANGES AND METHOD

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
PK16001 06/22/90	606-151-7000	M51	UTILITY	NO	\$1210.00	08/13/95

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 PK16002 07/17/95 08208972

03-3821 160
 03-3821 160

Final Interf. 160CH
 Final Drawing 561 30 160CH

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12 NOV 95
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(Authorized Signature) Edward J. Lynch
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2. TRANSMIT THIS FORM WITH PART B WHEN AUTHORIZING USE OF A DEPOSIT ACCOUNT